



4020 Kilpatrick Street  
Winston-Salem, NC 27104

David Duvall  
1200 Queens Road  
Charlotte, NC 28207-1868

Dear David Duvall,

Enclosed please find the standard initial letter and election form regarding your opportunity to continue group health coverage under the Novant Health, Inc. Group Benefit Plan (the "Plan") pursuant to the applicable provisions of the federal law known as "COBRA." We are sending you this cover letter to explain the details of your particular situation to you.

As you know, you terminated employment with Novant Health on July 30, 2018. Normally, coverage under the Plan ends on the last day of the date termination of employment occurs unless a team member elects continued coverage under COBRA. We did not send you the standard COBRA materials shortly after your termination of employment because we expected you to enter into a severance agreement with Novant Health that would have enabled you to continue your coverage under the Plan in the same manner as during your active employment until July 31, 2019, without making a COBRA election. Since, however, you declined to enter into the Executive Separation Agreement provided to you by Novant Health by the October 8, 2018 deadline for doing so, your coverage under the Plan ceased on July 30, 2018, absent your coverage continuing pursuant to COBRA.

While the delay in notifying you about your right to elect continued coverage under COBRA was reasonable, Novant Health has assumed the responsibility for making the COBRA premium payments for you for the last day of July and for the months of August, September and October. If you want to continue your coverage under the Plan beyond October 31, 2018, you should complete the enclosed COBRA election form and make the required monthly premium payments in accordance with the information set forth in the enclosed letter and election form. **Your coverage under the Plan will end on October 31, 2018 if you do not make a COBRA election to continue your coverage and pay the required COBRA premium.**

Please feel free to call me at (336) 277-6637 to discuss your situation if you have any questions or concerns.

Sincerely,

A handwritten signature in black ink, appearing to read 'Barry Sams', written over a horizontal line.

Barry Sams

Manager, Benefits Operations